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Bib Data Sheet

CONFIRMATION NO. 8489

|                                    |   |                     |                               |   |
|------------------------------------|---|---------------------|-------------------------------|---|
| <b>SERIAL NUMBER</b><br>09/854,093 | <b>FILING DATE</b><br>05/10/2001<br><b>RULE</b> | <b>CLASS</b><br>536 | <b>GROUP ART UNIT</b><br>1631 | <b>ATTORNEY<br/>DOCKET NO.</b><br>PF-0357-1 DIV |
|------------------------------------|---|---------------------|-------------------------------|---|

**APPLICANTS**

Preeti G. Lal, Santa Clara, CA;  
Y. Tom Tang, San Jose, CA;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A DIV OF 08/904,234 07/31/1997 PAT 6,232,459

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 01/28/2002

|   |                                   |                                |                               |                                    |
|---|-----------------------------------|--------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no  | <b>STATE OR<br/>COUNTRY</b><br>CA | <b>SHEETS<br/>DRAWING</b><br>8 | <b>TOTAL<br/>CLAIMS</b><br>20 | <b>INDEPENDENT<br/>CLAIMS</b><br>3 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                                   |                                |                               |                                    |
| Verified and<br>Acknowledged  | Examiner's Signature              | Initials                       |                               |                                    |

**ADDRESS**

INCYTE GENOMICS, INC.  
PATENT DEPARTMENT  
3160 Porter Drive  
Palo Alto, CA 94304

**TITLE**

New synaptojanin isoform

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|---------------------------------------|---|---|
| <b>FILING FEE<br/>RECEIVED</b><br>840 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                                 |
|                                       |   | <input type="checkbox"/> 1.16 Fees ( Filing )                     |
|                                       |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time ) |
|                                       |   | <input type="checkbox"/> 1.18 Fees ( Issue )                      |
|                                       |   | <input type="checkbox"/> Other _____                              |
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